



Minneapolis Health Department  
Environmental Health Division  
250 South Fourth Street - Room 300  
Minneapolis, MN 55415  
(612) 673-5807 Fax (612) 370-1416  
**SEND PAYMENTS BY ONLY MAIL OR FAX**

## SEDIMENT / FLAMMABLE WASTE TRAP PERMIT APPLICATION

Application Received

**Site map must accompany application showing trap location and a plan for new traps if applicable.**

SITE/OWNER INFORMATION		CONTRACTOR INFORMATION	
Site Name:		Contractor Name:	
Site Address:		Contractor Address:	
City:	State: Zip:	City:	State: Zip:
Owner Name: Telephone #:		Contractor Contact:	
Owner Address:		Phone:	Fax:
City:	State: Zip:		
Tank	Tank #1	Tank #2	Tank #3
Type of Tank	<input type="checkbox"/> Oil and Flammable Waste Separator <input type="checkbox"/> Sediment <input type="checkbox"/> Other:	<input type="checkbox"/> Oil and Flammable Waste Separator <input type="checkbox"/> Sediment <input type="checkbox"/> Other:	<input type="checkbox"/> Oil and Flammable Waste Separator <input type="checkbox"/> Sediment <input type="checkbox"/> Other:
Type of Work	<input type="checkbox"/> Install <input type="checkbox"/> Remove <input type="checkbox"/> Abandon	<input type="checkbox"/> Install <input type="checkbox"/> Remove <input type="checkbox"/> Abandon	<input type="checkbox"/> Install <input type="checkbox"/> Remove <input type="checkbox"/> Abandon
Abandonment Material	<input type="checkbox"/> Concrete Slurry <input type="checkbox"/> Inert Foam <input type="checkbox"/> Other:	<input type="checkbox"/> Concrete Slurry <input type="checkbox"/> Inert Foam <input type="checkbox"/> Other:	<input type="checkbox"/> Concrete Slurry <input type="checkbox"/> Inert Foam <input type="checkbox"/> Other:
Status & Size (gals)	Active-Yes <input type="checkbox"/> No <input type="checkbox"/> Size	Active-Yes <input type="checkbox"/> No <input type="checkbox"/> Size	Active-Yes <input type="checkbox"/> No <input type="checkbox"/> Size
Construction	<input type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other	<input type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other	<input type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Other
Type of User:	<input type="checkbox"/> Bulk Storage <input type="checkbox"/> Utility <input type="checkbox"/> Mercantile/Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Government <input type="checkbox"/> School <input type="checkbox"/> Residential <input type="checkbox"/> Repair garage <input type="checkbox"/> Other (Specify):		
Soil Sample	A soil sample analyzed for petroleum compounds will be required from beneath the flammable waste trap if there is evidence that it had leaked. Submit a copy of the soil sample results to Environmental Services.		
Operating Traps Access Cover:	Minnesota Rule 4715 requires that a separator must be installed to be readily accessible for service and maintenance, and must be maintained by periodic removal of accumulated liquids and solids from the separator.		
Operating Traps Maintenance Schedule	Minneapolis City Ordinance 48.270 requires that each oil/water separator and sediment trap shall be cleaned once a year or as required to maintain the integrity of the system, or as required by the Minneapolis Environmental Services. Records of this and other maintenance activities performed on the separator shall be kept on-site for not less than three (3) years. These records shall be made available to the authority upon written or verbal request.		
Additional Information:			
I certify that all the information provided in this application is true and complete. I certify that the work and materials will be in accordance with Minnesota State Rule 4715 and Minneapolis City Ordinance 48.270.			
Licensed or Registered Contractor Signature:		Date:	Registration or License Number:
Work Date: <input type="checkbox"/> Check if this is an approximate date.			
Call 673-5807 at least 48 hours prior to beginning work to confirm work date(s) and to set up inspection times.			
Receive permit via: <input type="checkbox"/> Pick up <input type="checkbox"/> Fax <input type="checkbox"/> Mail <input type="checkbox"/> Email to:			
<b>Payment must be received with application. MAKE PAYMENTS ONLY BY MAIL OR FAX, NO CASH</b>			
Permit fee is \$155.90 per device; total cost: \$_____			
Make checks payable to "Minneapolis Finance Department" or charge to: <input type="checkbox"/> Visa <input type="checkbox"/> MC Expires_____			
Cardholder Name:		Card #:	

Approval of this application and issuance of this Environmental Services permit does not eliminate the need for additional permits required by this Code or other governmental agencies which may include, but are not limited to: fire, mechanical, plumbing, electrical, erosion, construction, demolition, etc.